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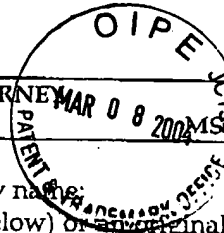
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# PATENT APPLICATION

## DECLARATION AND POWER OF ATTORNEY



ATTORNEY DOCKET NO. M61.12-0581

DOCKET NO. 306236.01

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name:  
 I believe I am the original, first and sole inventor (if only one name is listed below) or ~~an~~ original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **METHOD AND APPARATUS FOR CONTINUOUS VALUED VOCAL TRACT RESONANCE TRACKING USING PIECEWISE LINEAR APPROXIMATIONS**

the specification of which is filed herewith unless the following box is checked:

- (x) was filed on November 26, 2003 as US Application Serial No. or PCT International Application Number 10/723,995 and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

### Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____
			YES: _____ NO: _____

### POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with

Customer No. 27366

to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to:		Direct Telephone Calls To:	
Contact Name	Theodore M. Magee	Contact Name	Theodore M. Magee
Firm Name	Westman Champlin & Kelly	Contact Phone Number	612-334-3222
Firm Address	900 Second Ave. S., Ste. 1600		
City, State and Zip	Minneapolis, MN 55402-3319		

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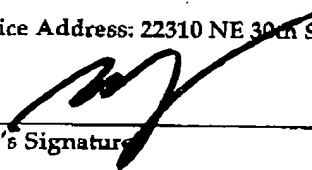
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Li Deng

Citizenship: Canada

Residence: Sammamish, WA

Post Office Address: 22310 NE 30th Street, Sammamish, WA 98074

  
Inventor's Signature12/22/03  
Date

Full Name of Inventor: Hagai Attias

Citizenship: Israel

Residence: San Francisco, CA

Post Office Address: 2952 Jackson St., San Francisco, CA 94115

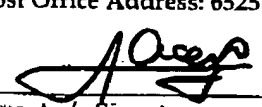
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Inventor's Signature\_\_\_\_\_  
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Full Name of Inventor: Alejandro Acero

Citizenship: Spain

Residence: Bellevue, WA

Post Office Address: 6525 163rd Place SE, Bellevue, WA 98006

  
Inventor's Signature12/22/03  
Date

Full Name of Inventor: Leo Lee

Citizenship: Canada

Residence: Ontario, Canada

Post Office Address: 310-106 Seagram Drive, Waterloo Ontario, Canada N2L3B8

\_\_\_\_\_  
Inventor's Signature\_\_\_\_\_  
Date

## PATENT APPLICATION

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ATTORNEY DOCKET NO. M61.12-0581MAR 08 2004  
PATENT & TRADEMARK OFFICE  
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Contact Name Theodore M. Magee  
Firm Name Westman Champlin & Kelly  
Firm Address 900 Second Ave. S., Ste. 1600  
City, State and Zip Minneapolis, MN 55402-3319

Contact Name Theodore M. Magee  
Contact Phone Number 612-334-3222

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. M61.12-0581

MS DOCKET NO. 306236.01

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Citizenship: Canada

Residence: Sammamish, WA

Post Office Address: 22310 NE 30th Street, Sammamish, WA 98074

\_\_\_\_\_  
Inventor's Signature

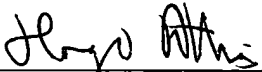
\_\_\_\_\_  
Date

Full Name of Inventor: Hagai Attias

Citizenship: Israel

Residence: San Francisco, CA

Post Office Address: 2952 Jackson St., San Francisco, CA 94115



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Full Name of Inventor: Alejandro Acero

Citizenship: Spain

Residence: Bellevue, WA

Post Office Address: 6525 163rd Place SE, Bellevue, WA 98006

\_\_\_\_\_  
Inventor's Signature

\_\_\_\_\_  
Date

Full Name of Inventor: Leo Lee

Citizenship: Canada

Residence: Ontario, Canada

Post Office Address: 310-106 Seagram Drive, Waterloo Ontario, Canada N2L3B8

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Citizenship: Canada

Residence: Sammamish, WA

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Date

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*Dec. 20, 2003*